



Program Name Internal Review

- Date of review: MMM DD, 2004
- Presented at MMM DD, 2004 GMEC meeting
- Reviewing committee:
 - Chair: Name, Program
 - **Faculty:**
 - Resident/Fellow:
 - Administrator:
- > Method: Utilized the materials & procedures of the SAUSHEC Internal

Internal Review Review Perotocel

Review of resident training records

leadership

Interviews with faculty using standardized questions

Interviews with residents using standardized questions





Program Status

- Leadership
 - > PD: Name (Appointed MMM YY)
 - > Associate PD: Name
- Number of residents/fellows:
- Last RRC inspection: MMM XXXX
 - > Type accreditation
 - > Approx date of next RRC visit: MMM XXXX



5 U S H

Strengths

List some examples or best practices)



IR Findings on Addressing Previous RRC Citations/IR Issues

- > (summary on how the program has or has not addressed each citation from last RRC accreditation letter- if none so state)
- > (summary on how the program has or has not addressed each issue from last internal review for which follow-up was requested by the



IR Findings on Implementation of General Competencies/Outcomes

- Program has (or does not have) an appropriate curriculum that addresses the 6 general competencies
 - Comment on any deficits in the curriculum)
- Program is (or is not) using appropriate evaluation tools to assess competency in the 6 general competencies
 - Comment on any deficits in the evaluation system)



MEDICALW



- Program has (does not have) a appropriate duty hour policy and staff and residents understand it
- Review of schedules & interview with PD, faculty & residents show program to be in compliance with (or not)
 - > 80 hour duty limit
 - > 24 + 6 continuous duty & 10 hours between duty
 - > Call < 1/3
 - > 1 day off per 7
- Program needs to ... (develop & implement fatigue education system for Staff & HS)



MEDICALWY

Other IR Findings

(Used to address admin, support, patient pop, etc that might warrant an RRC citation)



Summary & Recommendations

- > Summary
 - Program is/is not in substantial compliance with ACGME requirements at the time of this review ... (but there are areas for improvement)
- Recommendations
 - Address unresolved issues from previous RRC & Internal Review regarding ...
 - Address concerns about ...
- PD to give follow-up report to GMEC in XXXX or Follow-up report not required